

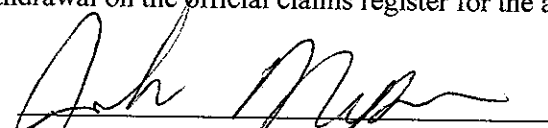
UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF NEW YORK

WITHDRAWAL OF CLAIM

Debtor Name and Case Number:	<input checked="" type="checkbox"/> Motors Liquidation Company, Case No. 09-50026 <input type="checkbox"/> MLC of Harlem, Inc., Case No. 09-13558 <input type="checkbox"/> MLCS, LLC, Case No. 09-50027 <input type="checkbox"/> MLCS Distribution Corporation, Case No. 09-50028 <input type="checkbox"/> Remediation and Liability Management Company, Inc., Case No. 09-50029 <input type="checkbox"/> Environmental Corporate Remediation Company, Inc., Case No. 09-50030
Creditor Name and Address:	JOHN J NAPPI 58 CHANCELLOR PARK DRIVE MAYS LANDING, NJ 08330
Claim Number (if known):	21495
Date Claim Filed:	11/9/2009
Total Amount of Claim Filed:	\$1,760.00

I, the undersigned, am the above-referenced creditor, or an authorized signatory for the above-referenced creditor. I hereby withdraw the above-referenced claim and authorize the Clerk of this Court, or their duly appointed Claims Agent, to reflect this withdrawal on the official claims register for the above-referenced Debtor.

Dated: 6-10-10

  
Print Name: JOHN NAPPI

Title (if applicable): \_\_\_\_\_

## DEFINITIONS

### ***Debtor***

The person, corporation or other entity that has filed a bankruptcy case is called the debtor.

### ***Creditor***

A creditor is any person, corporation, or other entity to which the debtor owed a debt.

### ***Proof of Claim***

A form filed with the clerk of the bankruptcy court where the bankruptcy case was filed, to tell the bankruptcy court how much the debtor owed a creditor (the amount of the creditor's claim).

## ITEMS TO BE COMPLETED ON THIS WITHDRAWAL OF CLAIM

### ***Court, Name of Debtor and Case Number:***

Fill in the name of the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the name of the debtor in the bankruptcy case, and the bankruptcy case number. If you received a notice of the case from the court, all of this information is near the top of the notice.

### ***Information about Creditor:***

Complete the section giving the name and address of the creditor that was listed on the previously filed Proof of Claim form.

### ***Information identifying the Claim that is to be withdrawn:***

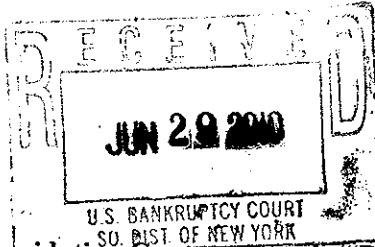
Complete the section giving the court claim number, date claim was filed and total amount of claim filed to help identify the claim that is to be withdrawn.

**Sign and print the name and title, if any, of the creditor or other person authorized to file this withdrawal of claim (attach copy of power of attorney, if any).**

This form must be filed with the clerk of the Bankruptcy Court for the Southern District of New York. Filing may be accomplished by mailing this form to Clerk, United States Bankruptcy Court for the Southern District of New York, One Bowling Green, New York, NY 10004-1408. Alternatively, attorneys with an ECF password may file this form electronically. A copy of the form should also be sent to Motors Liquidation Company c/o AlixPartners, Attn: Tim Neis, 500 Renaissance Center, Suite 1400, Detroit, MI 48243, or via email to [TNeis@alixpartners.com](mailto:TNeis@alixpartners.com), or via facsimile to 313-486-4258.

**VIA EMAIL AND FIRST CLASS MAIL**

Motors Liquidation Company  
Attn: Claims Team  
2101 Cedar Springs Road  
Suite 1100  
Dallas, TX 75201  
[claims@motorsliquidation.com](mailto:claims@motorsliquidation.com)



**RECEIVED**

JUN 15 2010

**Re: In re Motors Liquidation Company, et al. ("Debtors"), Case No. 09-50026 (REG) –  
Claim Documentation Letter**

Dear Motors Liquidation Company,

By this letter, I hereby submit the attached documentation in support of the following claim:

Claim Number	Claimant
21495	JOHN J NAPPI

I understand and acknowledge that submission of this letter does not constitute allowance of the above-described claim, and that the Debtors reserve all rights with respect to this claim.

Very truly yours,

X

Print Name

Address

*John Nappi*  
JOHN NAPPI  
58 HANGLOIR PARK DR  
MAYS LANDING NJ  
08330

City, State and Zip Code

MAYS LANDING NJ

08330